

COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W.
Director

ROBIN KAY, Ph.D.
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director



BOARD OF SUPERVISORS

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MARK RIDLEY-THOMAS
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DEPARTMENT OF MENTAL HEALTH

<http://dmh.lacounty.gov>

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

Reply To: (213) 738-4601
Fax: (213) 386-1297

October 15, 2013

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**AUTHORIZATION FOR SOLE SOURCE AMENDMENTS TO LEGAL ENTITY AGREEMENTS
WITH DIDI HIRSCH PSYCHIATRIC SERVICE AND
SPECIAL SERVICE FOR GROUPS TO IMPLEMENT
PROJECT 60 WOMEN AND CHILDREN AND
SSG ALLIANCE INTEGRATED CARE MOBILE TEAM
(THIRD DISTRICT)
(3 VOTES)**

SUBJECT

Request to amend Legal Entity Agreements with Didi Hirsch Psychiatric Service to implement Project 60 Women and Children to provide integrated services and residential services to vulnerable chronically homeless women and their children in the San Fernando Valley and with Special Service for Groups to implement the SSG Alliance Integrated Care Mobile Team to provide outreach, integrated services, and supportive housing for homeless adults and Transitional Aged Youth in the San Fernando Valley.

IT IS RECOMMENDED THAT THE BOARD:

1. Approve and authorize the Director of Mental Health (Director), or his designee, to prepare, sign, and execute an amendment, substantially similar to Attachment I, to revise Legal Entity (LE) Agreement No. MH120848 with Didi Hirsch Psychiatric Service (Didi Hirsch) for Fiscal Years (FYs) 2013-14 and 2014-15 to implement a pilot project, Project 60 Women and Children (P-60 W&C) to provide mental health, health, substance abuse, and residential services to homeless mentally ill women with children. The amendment will be effective upon your Board's approval and will add \$570,881 for FYs 2013-14 and 2014-15, increasing the Maximum Contract Amounts (MCAs) to \$31,685,500 and \$30,115,464, respectively.

2. Approve and authorize the Director, or his designee, to prepare, sign, and execute an amendment, substantially similar to Attachment II, to revise LE Agreement No. MH120886 with Special Service for Groups (SSG) for FYs 2013-14 and 2014-15 to implement the SSG Alliance Integrated Care Mobile Team (SSG ICMT) to provide outreach, medical, and mental health screening, evaluation and treatment, substance abuse treatment and supportive housing for adults with mental illness, including veterans and Transitional Aged Youth (TAY). The amendment will be effective upon your Board's approval and will add \$341,250 for FY 2013-14 and \$406,250 for FY 2014-15, increasing the MCAs to \$38,092,636 and \$37,233,012, respectively.

3. Delegate authority to the Director, or his designee, to prepare, sign, and execute future amendments to the Agreements with Didi Hirsch and SSG, and establish as new MCAs the aggregate of the original Agreements and all amendments, including providing time extensions if funding is available, provided that: 1) the County's total payments to the Contractors for each fiscal year do not exceed a 20 percent increase from the applicable Board-approved MCA; 2) any such increase is used to provide additional services or to reflect program and/or policy changes; 3) your Board has appropriated sufficient funds for all changes; 4) approval by County Counsel, or his designee, is obtained prior to any such amendment; 5) County and Contractors may, by written amendment, reduce programs or services and revise the applicable MCA, provided that any amendments which reduce programs or services will be consistent with the principles agreed to in DMH's stakeholders' process; and 6) the Director notifies your Board and the Chief Executive Officer (CEO) of agreement changes in writing within 30 days after execution of each amendment.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Board approval of the recommended actions will allow Didi Hirsch and SSG to implement pilot projects, P-60 W&C and the SSG ICMT, respectively, to focus on distinct needs of the chronically homeless population of the San Fernando Valley. The Board's approval of these actions will authorize further expansion of Project 50 replication programs in the Third District over a 24-month period.

Chronically homeless individuals frequently have co-occurring mental health and substance abuse disorders, often complicated by complex medical conditions that result in high utilization of costly hospital emergency rooms, acute inpatient units, long-term institutional services, and jails. In recent years, Los Angeles County has collaborated with governmental and non-governmental agencies to implement creative and innovative programs that address homelessness, such as Project 50 in the Skid Row area of downtown Los Angeles. However, chronically homeless individuals with serious mental illness and co-occurring substance abuse disorders and/or complex medical conditions continue to live on the streets, under freeway bridges, and in encampments, parks, or temporary shelters in areas throughout the County. This includes mentally ill women with children.

As part of the effort to meet the critical needs of these individuals, DMH, in coordination with the Third District, plans to expand services at Didi Hirsch to implement P-60 W&C, a pilot program to provide integrated health, mental health, substance abuse and residential services for homeless seriously mentally ill women with children, with capacity for 30 women at any given time. While other "Housing First" programs have addressed family homelessness, none has focused exclusively on dually diagnosed women and their children, who have endured their own traumas. P-60 W&C is designed to meet this specific need. This demonstration project will be the first of its kind in Los Angeles County, setting the stage for similar replications across the County.

In addition, in coordination with the Third District, DMH plans to expand services at SSG to

implement the SSG ICMT to provide outreach, medical and mental health screening, evaluation and treatment, substance abuse treatment, and supportive housing, with capacity for 40 homeless mentally ill adults, including veterans and TAY. These much needed mobile services will outreach to and engage this target population in integrated services, reducing the utilization of emergency and inpatient/institutional facilities, and also serving as a model for program replication.

Implementation of Strategic Plan Goals

The recommended actions are consistent with County Strategic Plan Goal 3, Integrated Services Delivery.

FISCAL IMPACT/FINANCING

The FY 2013-14 amendment amounts for Didi Hirsch and SSG are \$570,881 and \$341,250 respectively, fully funded by Third Supervisorial District Homeless Services funding in the amount of \$741,118 and Federal Financial Participation (FFP) Medi-Cal revenue in the amount of \$171,013. Funding for FY 2013-14 is included in DMH's Supplemental Changes. Funding for future years will be requested through DMH's annual budget request process.

There is no net County cost impact associated with the recommended actions.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The Third District awarded Didi Hirsch funds to make capital improvements and implement P-60 W&C at the Via Avanta site – a current women's residential substance abuse treatment program in Pacoima. P-60 W&C is a two-year pilot project and is highly challenging due to its out of the ordinary scope of mental health services. Didi Hirsch will serve seriously mentally ill chronically homeless individuals with a Project 50 approach. The project is designed to work with approximately 60 parenting, pregnant, or childless women, including up to 10 veterans, and 100 children over the two-year period. Adult participants will learn to understand and manage their disorders, become more effective as parents, gain stable housing, and attain personal and vocational goals. Specialized programming will address veterans' distinct needs. Children will get "back on track" developmentally and emotionally and will develop healthier attachments to their mothers. In addition to on-site mental health and substance abuse treatment, families will receive medical care from Westside Family Health Center's visiting Mobile Medical Unit, as well as off-site specialty care at Northeast Valley Health Corporation, a local Federally Qualified Healthcare Center. The goal is for all participants to be rapidly transitioned to permanent housing within six (6) months.

Didi Hirsch is selected for this project because it is the only agency in the area with all of the following qualifications: (1) the agency has a long history as a provider with DMH, the Department of Public Health's (DPH) Substance Abuse Prevention and Control, and the Department of Children and Family Services; (2) it has partnered with DMH in Project 50 and is uniquely familiar with the challenges of homeless individuals who struggle with mental illness and substance abuse; (3) it is a leader in treatment of abused/traumatized children and understands the challenges of children in kin/foster care, which will be the living situation of some P-60 W&C kids; and (4) it has an existing women's residential treatment program in Pacoima that can quickly be adapted to accommodate this pilot program.

The Third District also awarded funding to SSG to implement the SSG ICMT. SSG will also serve seriously mentally ill chronically homeless individuals with a Project 50 approach from its existing site in San Fernando Valley. The SSG ICMT project is highly challenging due to its need for out of the

ordinary scope of mental health services. It will provide field-based outreach, integrated primary care, substance abuse and mental health treatment services, with capacity to respond 24/7 to emergencies, to 40 homeless mentally ill adults, including TAY and up to 10 veterans, in the San Fernando Valley. The team will go into the community to identify and engage seriously mentally ill individuals who are also chronically homeless. The SSG ICMT will provide full-scope, wraparound services, including medical and mental health screening, assessment and treatment; substance abuse treatment; benefits establishment; and permanent housing.

SSG is selected for this project because it is uniquely qualified to provide these services from its existing site in San Fernando Valley and is the only agency in the area that has all of the following qualifications: (1) it has a long history with DMH and DPH providing a full range of integrated health, recovery-based mental health, and substance abuse treatment services for the mentally ill homeless population in Service Areas (SA) 2, 4, and 6; (2) it is the only agency located in SA 2 with the experience of providing Institutions for Mental Diseases Step-down services, a program that provides intensive integrated health, mental health, and substance abuse treatment services in a variety of housing options for individuals with complex medical and intensive mental health needs; (3) it provides services in more than 20 languages in addition to offering medical interpretation, navigation, and promotes services to its diverse clientele (services that include assertive outreach and engagement, individual and group treatment, medication support, crisis intervention, case management, benefits establishment and employment); and (4) it has immediate access to physical healthcare through its own Federally Qualified Health Center.

In accordance with your Board Policy Manual, Section 5.120, Authority to Approve Increases to Board Approved Contract Amounts requirements, DMH notified your Board on September 3, 2013 (Attachment III), identifying and justifying the need for requesting a percentage increase exceeding 10 percent, which have been reviewed by the CEO.

The attached amendment formats have been approved as to form by County Counsel. DMH will continue to administer and monitor the Agreements, evaluate programs to ensure that quality services are being provided, and ensure that agreement provisions and departmental policies are being followed.

CONTRACTING PROCESS

To comply with your Board's contracting policy for sole source contracts, DMH notified your Board on August 9, 2013, and August 12, 2013, of its intent to negotiate sole source amendments with Didi Hirsch and SSG, respectively (Attachments IV and V). In addition, attached is the required Sole Source Contract Checklist (Attachment VI), identifying and justifying the need for sole source contract actions, which was approved by the CEO.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Board approval of the proposed actions will allow DMH to continue to implement creative and innovative specialized programs similar to Project 50 that improve homeless individuals' quality of life and reduce their utilization of emergency, inpatient, institutional services, and jails.

The Honorable Board of Supervisors

10/15/2013

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Respectfully submitted,

A handwritten signature in black ink, appearing to read "Mg Southard". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

MARVIN J. SOUTHARD, D.S.W.

Director of Mental Health

MJS:RK:MM:RK:jk

Enclosures

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors
Chairperson, Mental Health Commission

CONTRACT NO. MH120848

AMENDMENT NO. 15

THIS AMENDMENT is made and entered into this ____ day of _____, 2013, by and between the COUNTY OF LOS ANGELES (hereafter "County") and Didi Hirsch Pscyhiatric Service (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated June 6, 2012, identified as County Agreement No. MH120848, as subsequently amended (hereafter collectively "Agreement"); and

WHEREAS, for Fiscal Years (FYs) 2013-14 and 2014-15, County and Contractor intend to amend Agreement only as described hereunder; and

WHEREAS, for FYs 2013-14 and 2014-15, County and Contractor intend to amend Agreement to implement Project 60 Women and Children pilot program to provide integrated health, mental health, substance abuse and residential services for 30 homeless and seriously mentally ill women with children; and

WHEREAS, for FYs 2013-14 and 2014-15, County and Contractor intend to amend Agreement to add Homeless Services (Non Medi-Cal/Non Healthy Families) Funded Program funds in the amount of \$261,355; and

WHEREAS, for FYs 2013-14 and 2014-15, County and Contractor intend to amend Agreement to add Homeless Services (Medi-Cal/Healthy Families) Funded Program funds in the amount of \$309,526; and

WHEREAS, for FYs 2013-14 and 2014-15, the revised Maximum Contract Amounts will be \$31,685,500 and \$30,115,464, respectively.

NOW, THEREFORE, County and Contractor agree that Agreement shall be amended, only as follows:

1. For FYs 2013-14 and 2014-15 Homeless Services (Non Medi-Cal/Non Healthy Families) Funded Program funds are **added** in the amount of **\$261,355**.
2. For FYs 2013-14 and 2014-15 Homeless Services (Medi-Cal/Healthy Families) Funded Program funds are **added** in the amount of **\$309,526**.
3. Financial Exhibit A (FINANCIAL PROVISIONS), Attachment II, Paragraph D (REIMBURSEMENT IF AGREEMENT IS AUTOMATICALLY RENEWED) Subparagraphs (1) (Reimbursement For First Automatic Renewal Period) and (2) (Reimbursement For Second Automatic Renewal Period) shall be deleted in their entirety and the following substituted therefor:

“D. **REIMBURSEMENT IF AGREEMENT IS AUTOMATICALLY RENEWED**

(1) **Reimbursement For First Automatic Renewal Period:** The Maximum Contract Amount for the First Automatic Renewal Period of this Agreement as described in Paragraph 1 (TERM) of the DMH Legal Entity Agreement shall not exceed **THIRTY-ONE MILLION SIX HUNDRED EIGHTY-FIVE THOUSAND FIVE HUNDRED** DOLLARS (**\$31,685,500**) and shall consist of Funded Programs as shown on the Financial Summary.

(2) **Reimbursement For Second Automatic Renewal Period:** The Maximum Contract Amount for the Second Automatic Renewal Period of this Agreement as described in Paragraph 1 (TERM) of the DMH Legal Entity Agreement shall not exceed **THIRTY MILLION ONE HUNDRED FIFTEEN THOUSAND FOUR HUNDRED SIXTY-FOUR** DOLLARS (**\$30,115,464**) and shall consist of Funded Programs as shown on the Financial Summary.”

4. Financial Summary - 14 for FY 2013-14, shall be deleted in its entirety and replaced with Financial Summary - 15 for FY 2013-14 attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary - 14 for FY 2013-14, shall be deemed amended to state "Financial Summary - 15 for FY 2013-14."
5. Financial Summary - 14 for FY 2014-15, shall be deleted in its entirety and replaced with Financial Summary - 15 for FY 2014-15 attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary - 14 for FY 2014-15, shall be deemed amended to state "Financial Summary - 15 for FY 2014-15."
6. Financial Summary Subprogram Schedule - 14 for FY 2013-14, shall be deleted in its entirety and replaced with Financial Summary Subprogram Schedule - 15 for FY 2013-14 attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary Subprogram Schedule - 14 for FY 2013-14, shall be deemed amended to state "Financial Summary Subprogram Schedule - 15 for FY 2013-14."
7. Contractor shall provide services in accordance with Contractor's FY 2012-13 Negotiation Package for this Agreement and any addenda thereto approved in writing by County's Director of Mental Health or his designee.
8. Except as provided in this Amendment, all other terms and conditions of the Agreement shall remain in full force and effect.

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by County's Director of Mental Health or his designee, and Contractor has caused this Amendment to be subscribed on its behalf by its duly authorized officer, on the day, month, and year first above written.

COUNTY OF LOS ANGELES

By _____
MARVIN J. SOUTHARD, D.S.W.
Director of Mental Health

Didi Hirsch Psychiatric Service
CONTRACTOR

By _____

Name Gary Waller

Title Director of Revenue Management
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:
OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT
ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By _____
Chief, Contracts Development
and Administration Division

JK: SSG/Didi Hirsch – FY 2013-14 – Am to add homeless funds

Financial Summary				
Contractor Name: Didi Hirsch Psychiatric Service		Amend 15		
LE Number: 00183		DMH Legal Entity Agreement - Attachment III		
Agreement Period: July 1, 2012 through June 30, 2013		The Financial Summary-15		
Fiscal Year: 2013-14				
A	B	C	D	E
Rank	Funded Programs	Medi-Cal Reimbursable (Y/N) ¹	Match Funds	Funded Program Amount (Gross Dollars)
CATEGORICALLY FUNDED PROGRAMS (100-399)				
100N	Family Preservation Program	N		\$ 48,200
130N	Specialized Foster Care - DCFS MAT (Non Medi-Cal/Non Healthy Families)	N		\$ 35,000
130M	Specialized Foster Care - Child Welfare Services (Medi-Cal/Healthy Families)	Y	\$ 18,047	\$ 265,000
132N	First 5 (Non Medi-Cal/Non Healthy Families)	N		\$ 23,932
132M	First 5 (Medi-Cal/ Healthy Families)	Y	\$ 24,000	\$ 48,000
140N	Comprehensive SOC Program (SAMHSA, CFDA #93.958)	N		
141N	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)	N		
142N	Family Wellness Network (SAMHSA, CFDA #93.243)	N		
150N	Juvenile Justice Program (STOP)	N	\$ 9,000	\$ 30,000
151N	Juvenile Justice Program (JJCPA -- MHSAT)	N		
152N	Juvenile Justice Program (JJCPA -- MST)	N		
153N	Juvenile Justice Program (Co-occurring Disorder)	N		
154N	Juvenile Justice Program (FFT) (Non Medi-Cal/Non Healthy Families)	N		
154M	Juvenile Justice Program (FFT) (Medi-Cal/Healthy Families)	Y		
160N	Path McKinney, CFDA #93.150	N		
170N	Homeless Services (NCC) (Non Medi-Cal/Non Healthy Families)	N		\$ 261,355
170M	Homeless Services (NCC) (Medi-Cal/Healthy Families)	Y	\$ 154,763	\$ 309,526
171N	Post-Release Community Supervision-Community Reintegration Program (Non Medi-Cal/Non Healthy Families)	N		\$ 307,602
171M	Post-Release Community Supervision-Community Reintegration Program (Medi-Cal/Healthy Families)	Y	\$ 50,000	\$ 100,000
180N	CalWORKs	N		\$ 963,067
181N	CalWORKs Homeless Family Project	N		
182N	GROW	N		
190N	PES Relief Plan (Non Medi-Cal/Non Healthy Families)	N		
190M	PES Relief Plan (Medi-Cal/Healthy Families)	Y		
Unique Categorically Funded Programs (Specify)				
300N	DCFS Medical Hubs (VIP)	N		
301M	DCFS Starview PHF	Y		
302N	DCFS Independent Living (Hillview)	N		
303N	DCFS THP (HFLF)	N		
310N	DHS Social Model (Dual Diagnosis)	N		
311N	DHS LAMP (Dual Diagnosis)	N		
312N	DHS BHS (Dual Diagnosis)	N		
320N	Juvenile Justice Program/Title IV-E - MST (Non Medi-Cal/Non Healthy Families)	N		
320M	Juvenile Justice Program/Title IV-E - MST (Medi-Cal/Healthy Families)	Y		
330N	Other Employment Services/CCJCC (SSG)	N		
340N	CGF IMD Step Down (Non Medi-Cal/Non Healthy Families)	N		
340M	CGF IMD Step Down (Medi-Cal/Healthy Families)	Y		
360M	Tri-City Realignment	Y		
CGF FUNDED PROGRAMS (400-499)				
400N	DMH (Non Medi-Cal/Non Healthy Families)	N		\$ 443,648
400M	DMH (Medi-Cal/Healthy Families)	Y	\$ 2,235,539	\$ 8,339,675
MENTAL HEALTH SERVICES ACT (MHSA) PROGRAMS (500-899)				
500N	Full Service Partnerships (Non Medi-Cal/Non Healthy Families)	N		\$ 2,118,413
500M	Full Service Partnerships (Medi-Cal/Healthy Families)	Y	\$ 1,245,378	\$ 3,145,808
510N	FCCS (Non Medi-Cal/Non Healthy Families)	N		\$ 202,939
510M	FCCS (Medi-Cal/Healthy Families)	Y	\$ 725,669	\$ 1,867,052
520N	Wellness Centers (Non Medi-Cal/Non Healthy Families)	N		\$ 373,471
520M	Wellness Centers (Medi-Cal/Healthy Families)	Y	\$ 483,257	\$ 1,011,230
530N	Alternative Crisis Services (Non Medi-Cal/Non Healthy Families)	N		
530M	Alternative Crisis Services (Medi-Cal/Healthy Families)	Y		
540N	IMD Step-Down (Non Medi-Cal/Non Healthy Families)	N		
540M	IMD Step-Down (Medi-Cal/Healthy Families)	Y		
600N	Prevention & Early Intervention Programs (Non Medi-Cal/Non Healthy Families)	N		\$ 2,538,474
600M	Prevention & Early Intervention Programs (Medi-Cal/Healthy Families)	Y	\$ 1,397,918	\$ 8,389,927
700N	Innovation Programs (Non Medi-Cal/Non Healthy Families)	N		\$ 580,356
700M	Innovation Programs (Medi-Cal/Healthy Families)	Y	\$ 104,767	\$ 282,825
Unique MHSA Programs (Specify)				
800N	Probation Camps	N		
810N	Jail Transition & Linkage	N		
820N	Planning, Outreach & Engagement	N		
Maximum Contract Amount				\$ 31,685,500

¹Medi-Cal reimbursable reflects DMH program guidelines in addition to applicable state and federal regulations.

Financial Summary				
Contractor Name: Didi Hirsch Psychiatric Service		Amend 14		
LE Number: 00183		DMH Legal Entity Agreement - Attachment III		
Agreement Period: July 1, 2012 through June 30, 2015		The Financial Summary-14		
Fiscal Year: 2014-15				
A	B	C	D	E
Rank	Funded Programs	Medi-Cal Reimbursable (Y/N) ¹	Match Funds	Funded Program Amount (Gross Dollars)
CATEGORICALLY FUNDED PROGRAMS (100-399)				
100N	Family Preservation Program	N		\$ 48,200
130N	Specialized Foster Care - DCFS MAT (Non Medi-Cal/Non Healthy Families)	N		\$ 35,000
130M	Specialized Foster Care - Child Welfare Services (Medi-Cal/Healthy Families)	Y	\$ 18,047	\$ 265,000
140N	Comprehensive SOC Program (SAMHSA, CFDA #93.958)	N		
141N	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)	N		
142N	Family Wellness Network (SAMHSA, CFDA #93.243)	N		
150N	Juvenile Justice Program (STOP)	N	\$ 9,000	\$ 30,000
151N	Juvenile Justice Program (JJCPA -- MHSAT)	N		
152N	Juvenile Justice Program (JJCPA -- MST)	N		
153N	Juvenile Justice Program (Co-occurring Disorder)	N		
154N	Juvenile Justice Program (FFT) (Non Medi-Cal/Non Healthy Families)	N		
154M	Juvenile Justice Program (FFT) (Medi-Cal/Healthy Families)	Y		
160N	Path McKinney, CFDA #93.150	N		
170N	Homeless Services (NCC) (Non Medi-Cal/Non Healthy Families)	N		\$ 261,355
170M	Homeless Services (NCC) (Medi-Cal/Healthy Families)	Y	\$ 154,763	\$ 309,526
171N	Post-Release Community Supervision-Community Reintegration Program (Non Medi-Cal/Non Healthy Families)	N		\$ 307,602
171M	Post-Release Community Supervision-Community Reintegration Program (Medi-Cal/Healthy Families)	Y	\$ 50,000	\$ 100,000
180N	CalWORKs	N		\$ 963,067
181N	CalWORKs Homeless Family Project	N		
182N	GROW	N		
190N	PES Relief Plan (Non Medi-Cal/Non Healthy Families)	N		
190M	PES Relief Plan (Medi-Cal/Healthy Families)	Y		
Unique Categorically Funded Programs (Specify)				
300N	DCFS Medical Hubs (VIP)	N		
301M	DCFS Starview PHF	Y		
302N	DCFS Independent Living (Hillview)	N		
303N	DCFS THP (HFLF)	N		
310N	DHS Social Model (Dual Diagnosis)	N		
311N	DHS LAMP (Dual Diagnosis)	N		
312N	DHS BHS (Dual Diagnosis)	N		
320N	Juvenile Justice Program/Title IV-E - MST (Non Medi-Cal/Non Healthy Families)	N		
320M	Juvenile Justice Program/Title IV-E - MST (Medi-Cal/Healthy Families)	Y		
330N	Other Employment Services/CCJCC (SSG)	N		
340N	CGF IMD Step Down (Non Medi-Cal/Non Healthy Families)	N		
340M	CGF IMD Step Down (Medi-Cal/Healthy Families)	Y		
360M	Tri-City Realignment	Y		
CGF FUNDED PROGRAMS (400-499)				
400N	DMH (Non Medi-Cal/Non Healthy Families)	N		\$ 443,648
400M	DMH (Medi-Cal/Healthy Families)	Y	\$ 2,235,539	\$ 8,339,675
MENTAL HEALTH SERVICES ACT (MHSA) PROGRAMS (500-899)				
500N	Full Service Partnerships (Non Medi-Cal/Non Healthy Families)	N		\$ 2,118,413
500M	Full Service Partnerships (Medi-Cal/Healthy Families)	Y	\$ 1,245,378	\$ 3,145,808
510N	FCCS (Non Medi-Cal/Non Healthy Families)	N		\$ 202,939
510M	FCCS (Medi-Cal/Healthy Families)	Y	\$ 725,669	\$ 1,867,052
520N	Wellness Centers (Non Medi-Cal/Non Healthy Families)	N		\$ 373,471
520M	Wellness Centers (Medi-Cal/Healthy Families)	Y	\$ 483,257	\$ 1,011,230
530N	Alternative Crisis Services (Non Medi-Cal/Non Healthy Families)	N		
530M	Alternative Crisis Services (Medi-Cal/Healthy Families)	Y		
540N	IMD Step-Down (Non Medi-Cal/Non Healthy Families)	N		
540M	IMD Step-Down (Medi-Cal/Healthy Families)	Y		
600N	Prevention & Early Intervention Programs (Non Medi-Cal/Non Healthy Families)	N		\$ 2,091,325
600M	Prevention & Early Intervention Programs (Medi-Cal/Healthy Families)	Y	\$ 848,025	\$ 7,338,972
700N	Innovation Programs (Non Medi-Cal/Non Healthy Families)	N		\$ 580,356
700M	Innovation Programs (Medi-Cal/Healthy Families)	Y	\$ 104,767	\$ 282,825
Unique MHSA Programs (Specify)				
800N	Probation Camps	N		
810N	Jail Transition & Linkage	N		
820N	Planning, Outreach & Engagement	N		
Maximum Contract Amount				\$ 30,115,464

¹Medi-Cal reimbursable reflects DMH program guidelines in addition to applicable state and federal regulations.

Financial Summary Subprogram Schedule											
Contractor Name: DDI HIRSCH PSYCHIATRIC SERVICE Legal Entity Number: 00183 Agreement Period: July 1, 2012 through June 30, 2015 Fiscal Year: FY 2013-14						DMH Legal Entity Agreement - Attachment IV The Financial Summary - Amendment Number - Amendment Date					
A	B	C	D	E	F	G	H				
Rank	Funded Program	Subprogram	IS Plan	Medi-Cal Reimbursable (Y/N) ¹	Non-Medi-Cal Direct/ Indirect Svcs (IS)	Medi-Cal/Healthy Family Funds Manual Invoice	Medi-Cal/Healthy Family Funds EPST Non-EPST Medi-Cal	Health Families	Subprogram Amount (Gross Dollars)		
CATEGORICALLY FUNDED PROGRAMS (100-399)											
100N	Family Preservation Program	Family Preservation Program	2011	N	48,200				\$ 48,200		
130N	Specialized Foster Care - DCFS MAT (Non Full Scope Medi-Cal/Non Healthy Families)	Specialized Foster Care - Child Welfare Services DCFS MAT (Non Medi-Cal/Non Healthy Families)	2077	N	35,000				\$ 35,000		
130M	Specialized Foster Care - Child Welfare Services (Medi-Cal/Healthy Families)	Enhanced Mental Health Services MAT	2064	Y			125,000		\$ 125,000		
			2072	Y			140,000		\$ 140,000		
		Wraparound	2079	Y					\$ -		
131N	Group Home Aftercare Services (Non Medi-Cal/Non Healthy Families)	Group Home Aftercare Services (Non Medi-Cal/Non Healthy Families)	2135	N					\$ -		
131M	Group Home Aftercare Services (Medi-Cal/Healthy Families)	Group Home Aftercare Services (Medi-Cal/Healthy Families)	2135	Y					\$ -		
132N	First 5 (Non Medi-Cal/Non Healthy Families)	First 5 (Non Medi-Cal/Non Healthy Families)	2137	N	14,923	9,009	48,000		\$ 23,932		
132M	First 5 (Medi-Cal/Healthy Families)	First 5 (Medi-Cal/Healthy Families)	2137	Y					\$ 48,000		
140N	Comprehensive SOC Program (SAMHSA, CFDA #93.958)	Comprehensive SOC Program (SAMHSA, CFDA #93.958)	2035	N					\$ -		
141N	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)	None	N					\$ -		
142N	Family Wellness Network (SAMHSA, CFDA #93.243)	Family Wellness Network (SAMHSA, CFDA #93.243)	None	N					\$ -		
150N	Juvenile Justice Program (STOP)	Juvenile Justice Program (STOP)	2027	N	30,000				\$ 30,000		
151N	Juvenile Justice Program (JUCPA – MHSAT)	Juvenile Justice Program (JUCPA – MHSAT)	2024	N					\$ -		
152N	Juvenile Justice Program (JUCPA – MST)	Juvenile Justice Program (JUCPA – MST)	2049	N					\$ -		
153N	Juvenile Justice Program (Co-occurring Disorder)	Juvenile Justice Program (Co-occurring Disorder)	2081	N					\$ -		
154N	Juvenile Justice Program (FFT) Non Medi-Cal/Non Healthy Families	Second Chance FFT Program	2123	N					\$ -		
154M	Juvenile Justice Program (FFT) Medi-Cal/Healthy Families	Juvenile Justice Program (FFT)	2071	N					\$ -		
160N	PATH McKinney, CFDA #93.150	Juvenile Justice Program (FFT)	2071	Y					\$ -		
170N	Homeless Services (Non Medi-Cal/Non Healthy Families)	PATH McKinney, CFDA #93.150	2023	N	261,355				\$ 261,355		
170M	Homeless Services (Medi-Cal/Healthy Families)	Homeless Services (Non Medi-Cal/Non Healthy Families)	NA	N					\$ -		
171N	Post-Release Community Supervision-Community Reintegration (PRCSCR) Program (Non Medi-Cal/Non Healthy Families)	Homeless Services (NCC) Medi-Cal/Healthy Families	2089	Y			309,526		\$ 309,526		
171M	Post-Release Community Supervision-Community Reintegration (PRCSCR) Program (Medi-Cal/Healthy Families)	PRCSCR Program (Non Medi-Cal/Non Healthy Families)	2134	N	307,602				\$ 307,602		
180N	CalWORKs	Healthy Way LA	NA	N					\$ -		
181N	CalWORKs Homeless Family Project	PRCSCR Program (Medi-Cal/Healthy Families)	2134	Y			100,000		\$ 100,000		
182N	GROW	CalWORKs Mental Health Services	2006	N	943,805				\$ 943,805		
190N	PES Relief Plan (Non Medi-Cal/Non Healthy Families)	Community Outreach Services	2006	N	19,261				\$ 19,261		
190M	PES Relief Plan (Medi-Cal/Healthy Families)	CalWORKs Homeless Family Project	2040	N					\$ -		
300N	DCFS Medical Hubs (VIP)	Community Outreach Services	2040	N					\$ -		
301M	DCFS Starview PHF	CalWORKs Homeless Family Project	2040	N					\$ -		
302N	DCFS Independent Living (Hilview)	Community Outreach Services	2040	N					\$ -		
303N	DCFS THP (HFLF)	Community Outreach Services	2040	N					\$ -		
310N	DHS Social Model (Dual Diagnosis)	GROW	2013	N					\$ -		
311N	DHS LAMP (Dual Diagnosis)	PES Relief Plan (Non Medi-Cal/Non Healthy Families)	2045	N					\$ -		
312N	DHS BHS (Dual Diagnosis)	Healthy Way LA	NA	N					\$ -		
320N	Juvenile Justice Program/Title IV-E - MST (Non Medi-Cal/Non Healthy Families)	Juvenile Justice Program/Title IV-E - MST (Non-Medi-Cal/Non Healthy Families)	2127	N					\$ -		
320M	Juvenile Justice Program/Title IV-E - MST (Medi-Cal/Healthy Families)	Juvenile Justice Program/Title IV-E - MST (Medi-Cal/Healthy Families)	2127	Y					\$ -		
330N	Other Employment Services/CCJCC (SSG)	Other Employment Services/CCJCC (SSG)	None	N					\$ -		
340M	CGF IMD Step Down (Non Medi-Cal/Non Healthy Families)	CGF IMD Step Down (Non Medi-Cal/Non Healthy Families)	2119	N					\$ -		
340M	CGF IMD Step Down (Medi-Cal/Healthy Families)	CGF IMD Step Down (Medi-Cal/Healthy Families)	2119	Y					\$ -		
360M	Federal/State Revenue	Federal/State Revenue	2082	Y					\$ -		
CGF FUNDED PROGRAMS (400-499)											
400N	DMH (Non Medi-Cal/Non Healthy Families Services)	DMH Mental Health Services (Non Medi-Cal/Non Healthy Families)	1000	N	430,037				\$ 430,037		
400M	DMH (Medi-Cal/Healthy Families Services)	Healthy Way LA	NA	N	13,611				\$ 13,611		
MENTAL HEALTH SERVICES ACT (MHSa) PROGRAMS (600-899)											
		DMH Mental Health Services (Medi-Cal/Healthy Families)	1000	Y			4,301,280	3,527,892	510,503	\$ 8,339,675	
		Child FSP - Family Support Services	2050	N					\$ -		

A	B	C	D	E	F	G	H
Rank	Funded Program	Subprogram	IS Plan	Medi-Cal Reimbursable (Y/N) ¹	Non-Medi-Cal Direct/ Indirect Svcs (IS)	Medi-Cal/Healthy Family Funds EPSDT Medi-Cal Non-EPSDT Medi-Cal	Subprogram Amount (Gross Dollars)
500N	Full Service Partnerships (Non Medi-Cal/Non Healthy Families)	Child FSP (Non Medi-Cal/Non Healthy Families) TAY FSP (Non Medi-Cal/Non Healthy Families) Adult FSP (Non Medi-Cal/Non Healthy Families) Older Adult FSP (Non Medi-Cal/Non Healthy Families) Healthy Way LA	2047 2051 2054 2057 NA	N N N N N	10,000 589,114 590,201 93,500 115,623		\$ 18,000 \$ 892,814 \$ 922,976 \$ 169,000 \$ 115,623
500M	Full Service Partnerships (Medi-Cal/Healthy Families)	Child FSP (Medi-Cal/Healthy Families) TAY FSP (Medi-Cal/Healthy Families) Adult FSP (Medi-Cal) Older Adult FSP (Medi-Cal) Child Wraparound (Medi-Cal/Healthy Families) TAY Wraparound (Medi-Cal/Healthy Families) Child FCCS (Non Medi-Cal/Non Healthy Families) TAY FCCS (Non Medi-Cal/Non Healthy Families) Adult FCCS (Non Medi-Cal/Non Healthy Families) Adult FCCS - Service Extenders Older Adult FCCS (Non Medi-Cal/Non Healthy Families) Older Adult FCCS - Service Extenders Healthy Way LA	2047 2051 2054 2057 2107 2114 2058 2078 2052 None 2070 None NA	Y Y Y Y Y Y N N N N N N N	63,040 695,298 1,569,252 413,310 10,000 63,049 72,107 39,790 17,993	63,040 404,908 1,569,252 413,310	\$ 63,040 \$ 1,100,206 \$ 1,569,252 \$ 413,310 \$ - \$ - \$ 10,000 \$ 63,049 \$ 72,107 \$ - \$ - \$ 39,790 \$ 17,993
510N	Field Capable Clinical Services (FCCS) Non Medi-Cal/Non Healthy Families	TAY FCCS (Non Medi-Cal/Non Healthy Families) Adult FCCS (Non Medi-Cal/Non Healthy Families) Adult FCCS - Service Extenders Older Adult FCCS (Non Medi-Cal/Non Healthy Families) Older Adult FCCS - Service Extenders Healthy Way LA	2058 2078 2052 None 2070 None	Y Y Y N N N	183,583 297,679 589,387 491,551		\$ 183,583 \$ 602,531 \$ 589,387 \$ 491,551 \$ 342,921 \$ 30,550
510M	Field Capable Clinical Services (FCCS) Medi-Cal/Healthy Families	Child FCCS (Medi-Cal/Healthy Families) TAY FCCS (Medi-Cal/Healthy Families) Adult FCCS (Medi-Cal) Older Adult FCCS (Medi-Cal) Wellness/Client-Run Centers (Non Medi-Cal/Non Healthy Families) Healthy Way LA	2058 2078 2052 2070 NA NA	Y Y Y Y N N	342,921 30,550	51,767 959,463	\$ 1,011,230 \$ - \$ - \$ - \$ - \$ 1,011,230
520N	Wellness Centers (Non Medi-Cal/Non Healthy Families)	Wellness/Client-Run Centers (Medi-Cal/Healthy Families) Enriched Residential Services (Non Medi-Cal/Non Healthy Families) Urgent Care Center (Non Medi-Cal/Non Healthy Families) Healthy Way LA	2068 2060 2062 NA	Y N N N			\$ - \$ - \$ - \$ -
520M	Wellness Centers (Medi-Cal/Healthy Families)	Enriched Residential Services (Medi-Cal/Healthy Families) Urgent Care Center (Medi-Cal/Healthy Families) IMD Step-Down (Non Medi-Cal/Non Healthy Families) Healthy Way LA	2060 2062 2062 NA	Y Y N N			\$ - \$ - \$ - \$ -
530N	Alternative Crisis Services (Non Medi-Cal/Non Healthy Families)	IMD Step-Down (Medi-Cal/Healthy Families) IMD Step-Down (Non Medi-Cal/Non Healthy Families) Healthy Way LA	2056 2056 NA	N N N			\$ - \$ - \$ -
530M	Alternative Crisis Services (Medi-Cal/Healthy Families)	IMD Step-Down (Medi-Cal/Healthy Families) IMD Step-Down (Non Medi-Cal/Non Healthy Families) PEI - Children (Non Medi-Cal/Non Healthy Families) PEI - TAY (Non Medi-Cal/Non Healthy Families) PEI - Adult (Non Medi-Cal/Non Healthy Families) PEI - Older Adult (Non Medi-Cal/Non Healthy Families) PEI - Training PEI - Technical Assistance PEI - Special Programs (Non Medi-Cal/Non Healthy Families)	2056 2056 2056 2058 2101 2092 2093 None None 2091	N N N Y N N N N N N	466,029 83,925 428,703 366,252 139,351 1,054,124		\$ 466,029 \$ 83,925 \$ 428,703 \$ 366,252 \$ 139,351 \$ 1,054,124
540N	IMD Step-Down (Non Medi-Cal/Non Healthy Families)	PEI - Children (Medi-Cal/Healthy Families) PEI - TAY (Medi-Cal/Healthy Families) PEI - Adult (Medi-Cal/Healthy Families) PEI - Older Adult (Medi-Cal/Healthy Families) Integrated Mobile Health Team (IMHT) Integrated Services Management Model (ISM) Integrated Clinic Model (ICM) Integrated Peer-Run Model - Community Outreach Services Healthy Way LA	2091 2098 2101 2092 2093 2130 2129 2128 2132 NA	N Y Y Y Y N N N N N		6,838,395 291,543 21,572 425,502 680,180 1,002	\$ 6,838,395 \$ 291,543 \$ 21,572 \$ 425,502 \$ 680,180 \$ 1,002
540M	IMD Step-Down (Medi-Cal/Healthy Families)	Integrated Mobile Health Team (IMHT) Integrated Services Management Model (ISM) Integrated Clinic Model (ICM) Integrated Peer-Run Model - Community Outreach Services Healthy Way LA	2130 2129 2128 2132 2130	N N N N N	424,237 156,119		\$ 424,237 \$ 156,119 \$ 580,356 \$ - \$ -
600N	Prevention & Early Intervention Programs (PEI) Non Medi-Cal/Healthy Families	Integrated Mobile Health Team (IMHT) Integrated Services Management Model (ISM) Integrated Clinic Model (ICM)	2129 2129 2128	Y Y Y		84,847 197,978	\$ 84,847 \$ 197,978 \$ 282,825
600M	Prevention & Early Intervention Programs (PEI) Medi-Cal/Healthy Families	Integrated Mobile Health Team (IMHT) Integrated Services Management Model (ISM) Integrated Clinic Model (ICM)	2130 2129 2128	N N N			\$ - \$ - \$ -
700N	Innovation (Non Medi-Cal/Non Healthy Families)	Integrated Mobile Health Team (IMHT) Integrated Services Management Model (ISM) Integrated Clinic Model (ICM)	2130 2129 2128	Y Y Y			\$ - \$ - \$ -
700M	Innovation (Medi-Cal/Healthy Families)	Integrated Mobile Health Team (IMHT) Integrated Services Management Model (ISM) Integrated Clinic Model (ICM)	2130 2129 2128	N N N			\$ - \$ - \$ -
800N	Unique MHSA Programs (Specify)	Probation Camp Program	2053	N			\$ -
810N	Jail Transition & Linkage	Jail Transition & Linkage	None	N			\$ -
820N	Planning, Outreach & Engagement	Planning, Outreach & Engagement	2084	N			\$ -
Maximum Contract Amount							\$ 31,685,499

Medi-Cal reimbursable reflects DMH program guidelines in addition to applicable state and federal regulations.

DID HIRSCH PSYCHIATRIC SERVICE

PREPARED ON 4/18/PM 09/30/2013

v57713

CONTRACT NO. MH120886

AMENDMENT NO. 25

THIS AMENDMENT is made and entered into this ____ day of _____, 2013, by and between the COUNTY OF LOS ANGELES (hereafter "County") and Special Service for Groups (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated June 6, 2012, identified as County Agreement No. MH120886, as subsequently amended (hereafter collectively "Agreement"); and

WHEREAS, for Fiscal Years (FYs) 2013-14 and 2014-15, County and Contractor intend to amend Agreement only as described hereunder; and

WHEREAS, for FYs 2013-14 and 2014-15, County and Contractor intend to amend Agreement to implement the SSG Alliance Integrated Care Mobile Team to provide outreach, medical and mental health screening, evaluation and treatment, substance abuse treatment, and supportive housing, with capacity for 40 homeless mentally ill adults, including veterans and Transitional Aged Youth; and

WHEREAS, for FYs 2013-14 and 2014-15, County and Contractor intend to amend Agreement to **add** Homeless Services (Non Medi-Cal/Non Healthy Families) Funded Program funds in the amounts of **\$308,750** and **\$243,750**, respectively; and

WHEREAS, for FYs 2013-14 and 2014-15, County and Contractor intend to amend Agreement to **add** Homeless Services (Medi-Cal/Healthy Families) Funded Program funds in the amounts of **\$32,500** and **\$162,500**, respectively; and

WHEREAS, for FYs 2013-14 and 2014-15, the revised Maximum Contract Amounts will be **\$38,092,636** and **\$37,233,012**, respectively.

NOW, THEREFORE, County and Contractor agree that Agreement shall be amended, only as follows:

1. For FYs 2013-14 and 2014-15 Homeless Services (Non Medi-Cal/Non Healthy Families) Funded Program funds are **added** in the amounts of **\$308,750** and **\$243,750**, respectively.
2. For FYs 2013-14 and 2014-15 Homeless Services (Medi-Cal/Healthy Families) Funded Program funds are **added** in the amounts of **\$32,500** and **\$162,500**, respectively.
3. Financial Exhibit A (FINANCIAL PROVISIONS), Attachment II, Paragraph D (REIMBURSEMENT IF AGREEMENT IS AUTOMATICALLY RENEWED) Subparagraphs (1) (Reimbursement For First Automatic Renewal Period) and (2) (Reimbursement For Second Automatic Renewal Period) shall be deleted in their entirety and the following substituted therefor:

“D. **REIMBURSEMENT IF AGREEMENT IS AUTOMATICALLY RENEWED**

(1) **Reimbursement For First Automatic Renewal Period:** The Maximum Contract Amount for the First Automatic Renewal Period of this Agreement as described in Paragraph 1 (TERM) of the DMH Legal Entity Agreement shall not exceed **THIRTY-EIGHT MILLION NINETY-TWO THOUSAND SIX HUNDRED THIRTY-SIX** DOLLARS (**\$38,092,636**) and shall consist of Funded Programs as shown on the Financial Summary.

(2) **Reimbursement For Second Automatic Renewal Period:** The Maximum Contract Amount for the Second Automatic Renewal Period of this

Agreement as described in Paragraph 1 (TERM) of the DMH Legal Entity Agreement shall not exceed **THIRTY-SEVEN MILLION TWO HUNDRED TWENTY-THREE THOUSAND TWELVE** DOLLARS (**\$37,223,012**) and shall consist of Funded Programs as shown on the Financial Summary.”

4. Financial Summary - 24 for FY 2013-14, shall be deleted in its entirety and replaced with Financial Summary - 25 for FY 2013-14 attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary - 24 for FY 2013-14, shall be deemed amended to state “Financial Summary - 25 for FY 2013-14.”
5. Financial Summary - 24 for FY 2014-15, shall be deleted in its entirety and replaced with Financial Summary - 25 for FY 2014-15 attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary - 24 for FY 2014-15, shall be deemed amended to state “Financial Summary - 25 for FY 2014-15.”
6. Financial Summary Subprogram Schedule - 24 for FY 2013-14, shall be deleted in its entirety and replaced with Financial Summary Subprogram Schedule - 25 for FY 2013-14 attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary Subprogram Schedule - 24 for FY 2013-14, shall be deemed amended to state “Financial Summary Subprogram Schedule - 25 for FY 2013-14.”
7. Contractor shall provide services in accordance with Contractor’s FY 2012-13 Negotiation Package for this Agreement and any addenda thereto approved in writing by County’s Director of Mental Health or his designee.

8. Except as provided in this Amendment, all other terms and conditions of the Agreement shall remain in full force and effect.

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by County's Director of Mental Health or his designee, and Contractor has caused this Amendment to be subscribed on its behalf by its duly authorized officer, on the day, month, and year first above written.

COUNTY OF LOS ANGELES

By _____
MARVIN J. SOUTHARD, D.S.W.
Director of Mental Health

Special Service for Groups
CONTRACTOR

By _____

Name Herbert Hatanaka, D.S.W.

Title Executive Director
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:
OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT
ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By _____
Chief, Contracts Development
and Administration Division

JK: SSG/Didi Hirsch – FY 2013-14 – Am to add homeless funds

Financial Summary				
Contractor Name: Special Service for Groups		DMH Legal Entity Agreement - Attachment III		
LE Number: 00214		The Financial Summary - 25		
Agreement Period: July 1, 2012 through June 30, 2015		Amendment Number - 25		
Fiscal Year: 2013-14		Amendment Date:		
A	B	C	D	E
Rank	Funded Programs	Medi-Cal Reimbursable (Y/N) ¹	Match Funds	Funded Program Amount (Gross Dollars)
CATEGORICALLY FUNDED PROGRAMS (100-399)				
100N	Family Preservation Program	N		
130N	Specialized Foster Care - DCFS MAT (Non Medi-Cal/Non Healthy Families)	N		
130M	Specialized Foster Care - Child Welfare Services (Medi-Cal/Healthy Families)	Y	\$ 106,455	\$ 1,563,216
131N	Group Home Aftercare Services (Non Medi-Cal/Non Healthy Families)	N		
131M	Group Home Aftercare Services (Medi-Cal/Healthy Families)	Y		
132N	First 5 (Non Medi-Cal/Non Healthy Families)	N		\$ 23,932
132M	First 5 (Medi-Cal/Healthy Families)	Y	\$ 24,000	\$ 48,000
140N	Comprehensive SOC Program (SAMHSA, CFDA #93.958)	N		
141N	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)	N		
142N	Family Wellness Network (SAMHSA, CFDA #93.243)	N		
150N	Juvenile Justice Program (STOP)	N		
151N	Juvenile Justice Program (JJCPA -- MHSAT)	N		
152N	Juvenile Justice Program (JJCPA -- MST)	N		
153N	Juvenile Justice Program (Co-occurring Disorder)	N		
154N	Juvenile Justice Program (FFT) (Non Medi-Cal/Non Healthy Families)	N		
154M	Juvenile Justice Program (FFT) (Medi-Cal/Healthy Families)	Y		
160N	PATH McKinney, CFDA #93.150	N		
170N	Homeless Services (Non Medi-Cal/Non Healthy Families)	N		\$ 308,750
170M	Homeless Services (Medi-Cal/Healthy Families)	Y	\$ 16,250	\$ 32,500
171N	Post-Release Community Supervision-Community Reintegration Program (Non Medi-Cal/Non Healthy Families)	N		\$ 2,444,745
171M	Post-Release Community Supervision-Community Reintegration Program (Medi-Cal/Healthy Families)	Y	\$ 372,925	\$ 745,850
180N	CalWORKs	N		\$ 336,737
181N	CalWORKs Homeless Family Project	N		
182N	GROW	N		
190N	PES Relief Plan (Non Medi-Cal/Non Healthy Families)	N		
190M	PES Relief Plan (Medi-Cal/Healthy Families)	Y		
Unique Categorically Funded Programs (Specify)				
300N	DCFS Medical Hubs (VIP)	N		
301M	DCFS Starview PHF	Y		
302N	DCFS Independent Living (Hillview)	N		
303N	DCFS THP (HFLF)	N		
310N	DHS Social Model (Dual Diagnosis)	N		
311N	DHS LAMP (Dual Diagnosis)	N		
312N	DHS BHS (Dual Diagnosis)	N		
320N	Juvenile Justice Program/Title IV-E - MST (Non Medi-Cal/Non Healthy Families)	N		
320M	Juvenile Justice Program/Title IV-E - MST (Medi-Cal/Healthy Families)	Y		
330N	Other Employment Services/CCJCC (SSG)	N		
340N	CGF IMD Step Down (Non Medi-Cal/Non Healthy Families)	N		\$ 1,588,800
340M	CGF IMD Step Down (Medi-Cal/Healthy Families)	Y	\$ 354,000	\$ 708,000
360M	Federal/State Revenue	Y		
CGF FUNDED PROGRAMS (400-499)				
400N	DMH (Non Medi-Cal/Non Healthy Families)	N		\$ 85,516
400M	DMH (Medi-Cal/Healthy Families)	Y	\$ 1,097,837	\$ 3,864,385
MENTAL HEALTH SERVICES ACT (MHSA) PROGRAMS (500-899)				
500N	Full Service Partnerships (Non Medi-Cal/Non Healthy Families)	N		\$ 2,501,495
500M	Full Service Partnerships (Medi-Cal/Healthy Families)	Y	\$ 1,209,012	\$ 5,279,720
510N	FCCS (Non Medi-Cal/Non Healthy Families)	N		\$ 399,214
510M	FCCS (Medi-Cal/Healthy Families)	Y	\$ 2,614,294	\$ 7,793,561
520N	Wellness Centers (Non Medi-Cal/Non Healthy Families)	N		\$ 441,000
520M	Wellness Centers (Medi-Cal/Healthy Families)	Y	\$ 104,140	\$ 208,279
530N	Alternative Crisis Services (Non Medi-Cal/Non Healthy Families)	N		\$ 150,000
530M	Alternative Crisis Services (Medi-Cal/Healthy Families)	Y		
540N	IMD Step-Down (Non Medi-Cal/Non Healthy Families)	N		\$ 484,400
540M	IMD Step-Down (Medi-Cal/Healthy Families)	Y	\$ 516,600	\$ 1,033,200
600N	Prevention & Early Intervention Programs (Non Medi-Cal/Non Healthy Families)	N		\$ 1,084,659
600M	Prevention & Early Intervention Programs (Medi-Cal/Healthy Families)	Y	\$ 604,371	\$ 3,631,594
700N	Innovation Programs (Non Medi-Cal/Non Healthy Families)	N		\$ 1,837,193
700M	Innovation Programs (Medi-Cal/Healthy Families)	Y	\$ 552,575	\$ 1,248,490
Unique MHSA Programs (Specify)				
800N	Probation Camps	N		
810N	Jail Transition & Linkage	N		\$ 249,400
820N	Planning, Outreach & Engagement	N		
Maximum Contract Amount				\$ 38,092,636

¹Medi-Cal reimbursable reflects DMH program guidelines in addition to applicable state and federal regulations.

Financial Summary				
Contractor Name: Special Service for Groups		DMH Legal Entity Agreement - Attachment III		
LE Number: 00214		The Financial Summary - 25		
Agreement Period: July 1, 2012 through June 30, 2015		Amendment Number - 25		
Fiscal Year: 2014-15		Amendment Date:		
A	B	C	D	E
Rank	Funded Programs	Medi-Cal Reimbursable (Y/N) ¹	Match Funds	Funded Program Amount (Gross Dollars)
CATEGORICALLY FUNDED PROGRAMS (100-399)				
100N	Family Preservation Program	N		
130N	Specialized Foster Care - DCFS MAT (Non Medi-Cal/Non Healthy Families)	N		
130M	Specialized Foster Care - Child Welfare Services (Medi-Cal/Healthy Families)	Y	\$ 106,455	\$ 1,563,216
131N	Group Home Aftercare Services (Non Medi-Cal/Non Healthy Families)	N		
131M	Group Home Aftercare Services (Medi-Cal/Healthy Families)	Y		
132N	First 5 (Non Medi-Cal/Non Healthy Families)	N		
132M	First 5 (Medi-Cal/Healthy Families)	Y		
140N	Comprehensive SOC Program (SAMHSA, CFDA #93.958)	N		
141N	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)	N		
142N	Family Wellness Network (SAMHSA, CFDA #93.243)	N		
150N	Juvenile Justice Program (STOP)	N		
151N	Juvenile Justice Program (JJCPA -- MHSAT)	N		
152N	Juvenile Justice Program (JJCPA -- MST)	N		
153N	Juvenile Justice Program (Co-occurring Disorder)	N		
154N	Juvenile Justice Program (FFT) (Non Medi-Cal/Non Healthy Families)	N		
154M	Juvenile Justice Program (FFT) (Medi-Cal/Healthy Families)	Y		
160N	PATH McKinney, CFDA #93.150	N		
170N	Homeless Services (Non Medi-Cal/Non Healthy Families)	N		\$ 243,750
170M	Homeless Services (Medi-Cal/Healthy Families)	Y	\$ 81,250	\$ 162,500
171N	Post-Release Community Supervision-Community Reintegration Program (Non Medi-Cal/Non Healthy Families)	N		\$ 2,444,745
171M	Post-Release Community Supervision-Community Reintegration Program (Medi-Cal/Healthy Families)	Y	\$ 372,925	\$ 745,850
180N	CalWORKs	N		\$ 336,737
181N	CalWORKs Homeless Family Project	N		
182N	GROW	N		
190N	PES Relief Plan (Non Medi-Cal/Non Healthy Families)	N		
190M	PES Relief Plan (Medi-Cal/Healthy Families)	Y		
Unique Categorically Funded Programs (Specify)				
300N	DCFS Medical Hubs (VIP)	N		
301M	DCFS Starview PHF	Y		
302N	DCFS Independent Living (Hillview)	N		
303N	DCFS THP (HFLF)	N		
310N	DHS Social Model (Dual Diagnosis)	N		
311N	DHS LAMP (Dual Diagnosis)	N		
312N	DHS BHS (Dual Diagnosis)	N		
320N	Juvenile Justice Program/Title IV-E - MST (Non Medi-Cal/Non Healthy Families)	N		
320M	Juvenile Justice Program/Title IV-E - MST (Medi-Cal/Healthy Families)	Y		
330N	Other Employment Services/CCJCC (SSG)	N		
340N	CGF IMD Step Down (Non Medi-Cal/Non Healthy Families)	N		\$ 1,588,800
340M	CGF IMD Step Down (Medi-Cal/Healthy Families)	Y	\$ 354,000	\$ 708,000
360M	Federal/State Revenue	Y		
CGF FUNDED PROGRAMS (400-499)				
400N	DMH (Non Medi-Cal/Non Healthy Families)	N		\$ 85,516
400M	DMH (Medi-Cal/Healthy Families)	Y	\$ 1,097,837	\$ 3,864,385
MENTAL HEALTH SERVICES ACT (MHSA) PROGRAMS (500-899)				
500N	Full Service Partnerships (Non Medi-Cal/Non Healthy Families)	N		\$ 2,501,495
500M	Full Service Partnerships (Medi-Cal/Healthy Families)	Y	\$ 1,209,012	\$ 5,279,720
510N	FCCS (Non Medi-Cal/Non Healthy Families)	N		\$ 399,214
510M	FCCS (Medi-Cal/Healthy Families)	Y	\$ 2,614,294	\$ 7,793,561
520N	Wellness Centers (Non Medi-Cal/Non Healthy Families)	N		\$ 441,000
520M	Wellness Centers (Medi-Cal/Healthy Families)	Y	\$ 104,140	\$ 208,279
530N	Alternative Crisis Services (Non Medi-Cal/Non Healthy Families)	N		\$ 150,000
530M	Alternative Crisis Services (Medi-Cal/Healthy Families)	Y		
540N	IMD Step-Down (Non Medi-Cal/Non Healthy Families)	N		\$ 484,400
540M	IMD Step-Down (Medi-Cal/Healthy Families)	Y	\$ 516,600	\$ 1,033,200
600N	Prevention & Early Intervention Programs (Non Medi-Cal/Non Healthy Families)	N		\$ 1,078,079
600M	Prevention & Early Intervention Programs (Medi-Cal/Healthy Families)	Y	\$ 604,371	\$ 3,631,594
700N	Innovation Programs (Non Medi-Cal/Non Healthy Families)	N		\$ 1,313,561
700M	Innovation Programs (Medi-Cal/Healthy Families)	Y	\$ 442,102	\$ 916,010
Unique MHSA Programs (Specify)				
800N	Probation Camps	N		
810N	Jail Transition & Linkage	N		\$ 249,400
820N	Planning, Outreach & Engagement	N		
Maximum Contract Amount				\$ 37,223,012

¹Medi-Cal reimbursable reflects DMH program guidelines in addition to applicable state and federal regulations.

Financial Summary Subprogram Schedule										
Contractor Name: SPECIAL SERVICE FOR GROUPS			DMH Legal Entity Agreement - Attachment IV							
Legal Entity Number: 00214			The Financial Summary - 25							
Agreement Period: July 1, 2012 through June 30, 2016			Amendment Number - 25							
Fiscal Year: FY 2013-14			Amendment Date							
A	B	C	D	E	F	G	H			
Rank	Funded Program	Subprogram	IS Plan	Medi-Cal Reimbursable (YN) ¹	Non-Medi-Cal Direct/ Indirect Svcs (IS)	Medi-Cal/Healthy Families EPSDT Medi-Cal	Medi-Cal/Healthy Families Non-EPSDT Medi-Cal	Family Funds Healthy Families	Subprogram Amount (Gross Dollars)	
CATEGORICALLY FUNDED PROGRAMS (100-399)										
100N	Family Preservation Program	Family Preservation Program	2011	N					\$ -	
	Healthy Way LA	Healthy Way LA		N					\$ -	
130N	Specialized Foster Care - DCFS MAT (Non Full Scope Medi-Cal/Non Healthy Families)	Specialized Foster Care - Child Welfare Services DCFS MAT (Non Medi-Cal/Non Healthy Families)	2077	N					\$ -	
	Specialized Foster Care - Child Welfare Services (Medi-Cal/Healthy Families)	Enhanced Mental Health Services MAT	2064	Y					\$ -	
130M			2072	Y					\$ -	
		Wraparound	2079	Y			1,563,216		\$ 1,563,216	
131N	Group Home Aftercare Services (Non Medi-Cal/Non Healthy Families)	Group Home Aftercare Services (Non Medi-Cal/Non Healthy Families)	2135	N					\$ -	
131M	Group Home Aftercare Services (Medi-Cal/Healthy Families)	Group Home Aftercare Services (Medi-Cal/Healthy Families)	2135	Y					\$ -	
132N	First 5 (Non Medi-Cal/Non Healthy Families)	First 5 (Non Medi-Cal/Non Healthy Families)	2137	N	14,923	9,009			\$ 23,932	
132M	First 5 (Medi-Cal/Healthy Families)	First 5 (Medi-Cal/Healthy Families)	2137	Y			48,000		\$ 48,000	
140N	Comprehensive SOC Program (SAMHSA, CFDA #93.958)	Comprehensive SOC Program (SAMHSA, CFDA #93.958)	2035	N					\$ -	
141N	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)	Child MH Initiative-Project ABC (SAMHSA, CFDA #93.104)	None	N					\$ -	
142N	Family Wellness Network (SAMHSA, CFDA #93.243)	Family Wellness Network (SAMHSA, CFDA #93.243)	None	N					\$ -	
150N	Juvenile Justice Program (STOP)	Juvenile Justice Program (STOP)	2027	N					\$ -	
151N	Juvenile Justice Program (JUCPA - MHSAT)	Juvenile Justice Program (JUCPA - MHSAT)	2024	N					\$ -	
152N	Juvenile Justice Program (JUCPA - MST)	Juvenile Justice Program (JUCPA - MST)	2049	N					\$ -	
153N	Juvenile Justice Program (Co-occurring Disorder)	Juvenile Justice Program (Co-occurring Disorder)	2081	N					\$ -	
154N	Juvenile Justice Program (FFT) Non Medi-Cal/Non Healthy Families	Second Chance FFT Program	2123	N					\$ -	
154M	Juvenile Justice Program (FFT) Medi-Cal/Healthy Families	Juvenile Justice Program (FFT)	2071	N					\$ -	
160M	PATH McKinney, CFDA #93.150	Juvenile Justice Program (FFT)	2071	Y					\$ -	
170N	Homeless Services (Non Medi-Cal/Non Healthy Families)	Homeless Services (Non Medi-Cal/Non Healthy Families)	2089	N	308,750				\$ 308,750	
170M	Homeless Services (Medi-Cal/Healthy Families)	Homeless Services (NCC) Medi-Cal/Healthy Families	2089	Y			32,500		\$ 32,500	
171N	Post-Release Community Supervision-Community Reintegration (PRCSCR) Program (Non Medi-Cal/Non Healthy Families)	PRCSCR Program (Non Medi-Cal/Non Healthy Families)	2134	N	2,390,245	54,500			\$ 2,444,745	
171M	Post-Release Community Supervision-Community Reintegration (PRCSCR) Program (Medi-Cal/Healthy Families)	Healthy Way LA	NA	N					\$ -	
180N	CalWORKs	PRCSCR Program (Medi-Cal/Healthy Families)	2134	Y			745,850		\$ 745,850	
181N	CalWORKs Homeless Family Project	CalWORKs Mental Health Services	2006	N	330,002				\$ 330,002	
182N	GROW	Community Outreach Services	2006	N	6,735				\$ 6,735	
190N	PES Relief Plan (Non Medi-Cal/Non Healthy Families)	CalWORKs Homeless Family Project	2040	N					\$ -	
190M	PES Relief Plan (Medi-Cal/Healthy Families)	Community Outreach Services	2040	N					\$ -	
		GROW	2013	N					\$ -	
		PES Relief Plan (Non Medi-Cal/Non Healthy Families)	2045	N					\$ -	
		Healthy Way LA	NA	N					\$ -	
		PES Relief Plan (Medi-Cal/Healthy Families)	2045	Y					\$ -	
Unique Categorical Funded Programs (Specify)										
300N	DCFS Medical Hubs (VIP)	DCFS Medical Hubs	2044	N					\$ -	
301M	DCFS Starview PHF	DCFS Starview PHF	2038	Y					\$ -	
302N	DCFS Independent Living (Hilview)	DCFS Independent Living (Hilview)	2039	N					\$ -	
303N	DCFS THP (HFLF)	DCFS THP (HFLF)	2039	N					\$ -	
310N	DHS Social Model (Dual Diagnosis)	DHS Social Model (Dual Diagnosis)	2010	N					\$ -	
311N	DHS LAMP (Dual Diagnosis)	DHS LAMP (Dual Diagnosis)	2010	N					\$ -	
312N	DHS BHS (Dual Diagnosis)	DHS BHS (Dual Diagnosis)	2010	N					\$ -	
		Healthy Way LA	NA	N					\$ -	
320N	Juvenile Justice Program/Title IV-E - MST (Non Medi-Cal/Non Healthy Families)	Juvenile Justice Program/Title IV-E - MST (Non-Medi-Cal/Non Healthy Families)	2127	N					\$ -	
320M	Juvenile Justice Program/Title IV-E - MST (Medi-Cal/Healthy Families)	Juvenile Justice Program/Title IV-E - MST (Medi-Cal/Healthy Families)	2127	Y					\$ -	
330N	Other Employment Services/CCJCC (SSG)	Other Employment Services/CCJCC (SSG)	None	N					\$ -	
340M	CGF IMD Step Down (Non Medi-Cal/Non Healthy Families)	CGF IMD Step Down (Non Medi-Cal/Non Healthy Families)	2119	N	1,588,800				\$ 1,588,800	
340M	CGF IMD Step Down (Medi-Cal/Healthy Families)	CGF IMD Step Down (Medi-Cal/Healthy Families)	2119	Y			708,000		\$ 708,000	
360M	Federal/State Revenue	Federal/State Revenue	2082	Y					\$ -	
CGF FUNDED PROGRAMS (400-499)										
400N	DMH (Non Medi-Cal/Non Healthy Families Services)	DMH Mental Health Services (Non Medi-Cal/Non Healthy Families)	1000	N	70,000				\$ 70,000	
400M	DMH (Medi-Cal/Healthy Families Services)	Healthy Way LA	NA	N	15,516				\$ 15,516	
		DMH Mental Health Services (Medi-Cal/Healthy Families)	1000	Y			1,886,468	1,847,317	\$ 130,600	\$ 3,864,385
MENTAL HEALTH SERVICES ACT (MHSA) PROGRAMS (500-999)										
		Child FSP - Family Support Services	2050	N	73,700				\$ 73,700	

A	B	C	D	E	F	G	H	
Rank	Funded Program	Subprogram	IS Plan	Medi-Cal Reimbursable (YN) ¹	Non-Medi-Cal Funds Direct/ Indirect Svcs (IS)	Medi-Cal/Healthy Family Funds EPSDT Medi-Cal Non-EPSDT Medi-Cal Health Families	Subprogram Amount (Gross Dollars)	
500N	Full Service Partnerships (Non Medi-Cal/Non Healthy Families)	Child FSP (Non Medi-Cal/Non Healthy Families)	2047	N	114,000		\$ 146,700	
		TAY FSP (Non Medi-Cal/Non Healthy Families)	2051	N	420,000		\$ 734,190	
		Adult FSP (Non Medi-Cal/Non Healthy Families)	2054	N	712,600		\$ 1,353,025	
		Older Adult FSP (Non Medi-Cal/Non Healthy Families)	2057	N	96,000		\$ 193,880	
		Healthy Way LA	NA	N			\$ -	
500M	Full Service Partnerships (Medi-Cal/Healthy Families)	Child FSP (Medi-Cal/Healthy Families)	2047	Y		1,102,000	\$ 1,159,000	
		TAY FSP (Medi-Cal/Healthy Families)	2051	Y		574,000	\$ 826,000	
		Adult FSP (Medi-Cal)	2054	Y		1,365,600	\$ 1,365,600	
		Older Adult FSP (Medi-Cal)	2057	Y		312,000	\$ 312,000	
		Child Wraparound (Medi-Cal/Healthy Families)	2107	Y		1,024,176	\$ 1,024,176	
510N	Field Capable Clinical Services (FCCS) Non Medi-Cal/Non Healthy Families	TAY Wraparound (Medi-Cal/Healthy Families)	2114	Y		592,944	\$ 592,944	
		Child FCCS (Non Medi-Cal/Non Healthy Families)	2058	N			\$ -	
		TAY FCCS (Non Medi-Cal/Non Healthy Families)	2078	N			\$ -	
		Adult FCCS (Non Medi-Cal/Non Healthy Families)	2052	N	105,000	12,400	\$ 117,400	
		Adult FCCS - Service Extenders	None	N			\$ -	
510M	Field Capable Clinical Services (FCCS) Medi-Cal/Healthy Families	Older Adult FCCS (Non Medi-Cal/Non Healthy Families)	2070	N	226,910	19,566	\$ 246,476	
		Older Adult FCCS - Service Extenders	None	N	35,338		\$ 35,338	
		Healthy Way LA	NA	N			\$ -	
		Child FCCS (Medi-Cal/Healthy Families)	2058	Y		2,969,407	\$ 2,969,407	
		TAY FCCS (Medi-Cal/Healthy Families)	2078	Y			\$ -	
520N	Wellness Centers (Non Medi-Cal/Non Healthy Families)	Adult FCCS (Medi-Cal)	2052	Y		4,123,320	\$ 4,123,320	
		Older Adult FCCS (Medi-Cal)	2070	Y		700,834	\$ 700,834	
		Wellness/Client-Run Centers (Non Medi-Cal/Non Healthy Families)	2068	N	441,000		\$ 441,000	
		Healthy Way LA	NA	N			\$ -	
		Wellness Centers (Medi-Cal/Healthy Families)	2068	Y		208,279	\$ 208,279	
530N	Alternative Crisis Services (Non Medi-Cal/Non Healthy Families)	Enriched Residential Services (Non Medi-Cal/Non Healthy Families)	2060	N			\$ -	
		Urgent Care Center (Non Medi-Cal/Non Healthy Families)	2062	N	150,000		\$ 150,000	
		Healthy Way LA	NA	N			\$ -	
		Enriched Residential Services (Medi-Cal/Healthy Families)	2060	Y			\$ -	
		Urgent Care Center (Medi-Cal/Healthy Families)	2062	Y			\$ -	
530M	Alternative Crisis Services (Medi-Cal/Healthy Families)	IMD Step Down (Non Medi-Cal/Non Healthy Families)	2056	N	404,400	80,000	\$ 484,400	
		Healthy Way LA	NA	N			\$ -	
		IMD Step Down (Medi-Cal/Healthy Families)	2056	Y			\$ 1,033,200	
		PEI - Children (Non Medi-Cal/Non Healthy Families)	2098	N	108,550	21,992	\$ 130,542	
		PEI - TAY (Non Medi-Cal/Non Healthy Families)	2101	N	345,441		\$ 345,441	
600N	Prevention & Early Intervention Programs (PEI) Non Medi-Cal/Non Healthy Families	PEI - Adult (Non Medi-Cal/Non Healthy Families)	2092	N	201,013		\$ 201,013	
		PEI - Older Adult (Non Medi-Cal/Non Healthy Families)	2093	N	366,252		\$ 366,252	
		PEI - Training	None	N		18,558	\$ 18,558	
		PEI - Technical Assistance	None	N			\$ -	
		PEI - Special Programs (Non Medi-Cal/Non Healthy Families)	2091	N	13,782	9,071	\$ 22,853	
600M	Prevention & Early Intervention Programs (PEI) Medi-Cal/Healthy Families	PEI - Children (Medi-Cal/Healthy Families)	2098	Y		1,771,979	\$ 40,669	
		PEI - TAY (Medi-Cal/Healthy Families)	2101	Y		1,008,707	\$ 1,138,766	
		PEI - Adult (Medi-Cal/Healthy Families)	2092	Y			\$ -	
		PEI - Older Adult (Medi-Cal/Healthy Families)	2093	Y			\$ 680,180	
		PEI - Special Programs (Medi-Cal/Healthy Families)	2091	Y			\$ -	
700N	Innovation (Non Medi-Cal/Non Healthy Families)	Integrated Mobile Health Team (IMHT)	2130	N	30,100		\$ 30,100	
		Integrated Services Management Model (ISM)	2129	N	928,877	284,800	\$ 1,213,677	
		Integrated Clinic Model (ICM)	2128	N	389,796	203,620	\$ 593,416	
		Integrated Peer-Run Model - Community Outreach Services	2132	N			\$ -	
		Healthy Way LA	NA	N			\$ -	
700M	Innovation (Medi-Cal/Healthy Families)	Integrated Mobile Health Team (IMHT)	2130	Y		822	\$ 29,922	
		Integrated Services Management Model (ISM)	2129	Y		165,120	\$ 585,400	
		Integrated Clinic Model (ICM)	2128	Y		633,168	\$ 633,168	
		Unique MHSA Programs (Specify)					\$ -	
		Probation Camp Program	2053	N			\$ -	
810N	Jail Transition & Linkage Planning, Outreach & Engagement	Jail Transition & Linkage	None	N	249,400		\$ 249,400	
		Planning, Outreach & Engagement	2084	N			\$ -	
		Maximum Contract Amount					\$ 38,092,636	
		Medi-Cal reimbursable reflects DMH program guidelines in addition to applicable state and federal regulations.						
		PREPARED: 4:20 PM 09/30/2013 SPECIAL SERVICE FOR GROUPS V57/13						

Medi-Cal reimbursable reflects DMH program guidelines in addition to applicable state and federal regulations.

SPECIAL SERVICE FOR GROUPS

PREPARED ON: 4/20/PM 09/30/2013

v5/7/13



**LAC
DMH**
LOS ANGELES COUNTY
DEPARTMENT OF
MENTAL HEALTH

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
550 S. VERMONT AVE., LOS ANGELES, CA 90020 HTTP://DMH.LACOUNTY.GOV



MARVIN J. SOUTHARD, D.S.W.
Director
ROBIN KAY, Ph.D.
Chief Deputy Director
RODERICK SHANER, M.D.
Medical Director

September 3, 2013

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director

SUBJECT: **REQUEST TO INCREASE DELEGATED AUTHORITY PERCENTAGE
IN THE BOARD LETTER TO AMEND LEGAL ENTITY AGREEMENTS
WITH DIDI HIRSCH PSYCHIATRIC SERVICE AND SPECIAL SERVICE
FOR GROUPS**

This memorandum is to comply with Board Policy Manual, Section 5.120, Authority to Approve Increases to Board-Approved Contract Amounts. The Policy mandates that any department requesting a percentage increase exceeding 10 percent of the total contract amount must provide a detailed justification and advance written notice to your Board, with a copy to the Chief Executive Officer, at least two weeks prior to the Board Meeting at which the proposed contract is to be presented.

With the addition of new funding streams, programs, and services, the Department of Mental Health (DMH) requests an additional 10 percent for a total of 20 percent delegated authority to increase the Maximum Contract Amounts of the Legal Entity Agreements with Didi Hirsch Psychiatric Service and Special Service for Groups (SSG), which are being amended via sole source in coordination with the Third Supervisorial District to implement pilot projects, Project 60 Women and Children and the SSG Alliance Integrated Care Mobile Team, respectively, to focus on distinct needs of the chronically homeless population of the San Fernando Valley.

This authority will allow DMH greater capacity to amend contracts to implement these new funding streams, programs, and services in a more expeditious manner. It will also allow DMH and its contract agencies to maintain business continuity in the provision of current mental health services to severely and persistently mentally ill adults, seriously emotionally disturbed children, adolescents, and their families throughout the County of Los Angeles. In most instances where speed and response time are of key importance, the increased delegated authority will allow DMH and its network of contract agencies to maximize, prioritize, and increase access to services on a continuous and ever-increasing basis to its ever-growing clientele, which more effectively meets the County's mission "To Enrich Lives Through Effective And Caring Service."

Each Supervisor
September 3, 2013
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Should there be a need to exceed the 20 percent delegated authority, DMH will return to your Board with a request for authority to amend the contracts accordingly.

If you have any questions or concerns please contact me, or your staff may contact Richard Kushi, Chief, Contracts Development and Administration Division, at (213) 738-4684.

MJS:RK:MM:RK:jk

c: Executive Officer, Board of Supervisors
 Chief Executive Officer
 County Counsel
 Robin Kay, Ph.D.
 Margo Morales
 Deputy Directors
 District Chiefs
 Kimberly Nall
 Richard Kushi



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
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MARVIN J. SOUTHARD, D.S.W.
Director

ROBIN KAY, Ph.D.
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director

August 9, 2013

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director

SUBJECT: **NOTIFICATION OF INTENT TO ENTER INTO SOLE SOURCE
CONTRACT NEGOTIATIONS WITH DIDI HIRSCH MENTAL HEALTH
CENTER**

This memo is to comply with the Board of Supervisors Policy Manual, Section 5.100, Sole Source contract. It is the Los Angeles County Department of Mental Health's (DMH's) intent to amend its current agreement with Didi Hirsch Mental Health Center (Didi Hirsch) to implement a two-year pilot project, Project 60 Women and Children (P-60 W&C) to provide mental health, health, substance abuse, and residential services to vulnerable chronically homeless mentally ill women with children in the San Fernando Valley.

In recent years, Los Angeles County has collaborated with governmental and non-governmental agencies to implement creative and innovative programs that address homelessness, such as Project 50 in the Skid Row area of downtown Los Angeles. However, chronically homeless individuals with serious mental illness and co-occurring substance abuse disorders and/or complex medical conditions continue to live on the streets, under freeway bridges, and in encampments, parks, or temporary shelters in areas throughout the County. This includes mentally ill women with children.

As part of the effort to meet the critical needs of these individuals, DMH, in coordination with the Third District, plans to expand services at Didi Hirsch to implement P-60 W&C a pilot program to provide integrated health, mental health, substance abuse, and residential services for homeless seriously mentally ill women with children, with capacity for thirty (30) women at any given time.

Over the course of the two-year period, the project and associated administration costs will be funded with County General Funds approved by the Board of Supervisors as part of the County's Homeless Prevention Initiative to fund homeless services. The project total for both fiscal years is \$1,217,412, funded with \$907,886 of Third Supervisorial District Homeless Services funding and \$309,526 of Federal Financial Participation Medi-Cal.

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August 9, 2013
Page 2

This two-year pilot project will be based at Via Avanta, Didi Hirsch's current women's residential substance abuse treatment program in Pacoima. The project is designed to work with a total of approximately sixty (60) parenting, pregnant, or childless women, including up to ten (10) veterans, and one hundred (100) children over the two-year period. Adult participants will learn to understand and manage their disorders, become more effective as parents, gain stable housing, and attain personal, and vocational goals. Specialized programming will address veterans' distinct needs. Children will get "back on track" developmentally and emotionally and will develop healthier attachments to their mothers. In addition to on-site mental health and substance abuse treatment, families will receive medical care from Westside Family Health Center's visiting Mobile Medical Unit, as well as off-site specialty care at Northeast Valley Health Corporation, the local Federally Qualified Healthcare Center (FQHC). The goal is for all participants to be rapidly transitioned to permanent housing within six months.

Didi Hirsch is uniquely qualified to provide these services because it has a long history as a provider for DMH, Department of Public Health's Substance Abuse Prevention and Control, and Department of Children and Family Services. The agency was a partner with the County in Project 50 and is familiar with the challenges of homeless individuals who struggle with mental illness and substance abuse. In addition, the agency is a leader in treatment of abused/traumatized children and understands the challenges of children in kin/fostercare, which will be the living situation of some P-60 W&C kids. It has an existing women's residential treatment program in Pacoima that can quickly be adapted to accommodate this pilot program,

Unless otherwise instructed by a Board office within two weeks, DMH will proceed with preparing a sole source contract amendment. DMH will work closely with the Office of the County Counsel and the Chief Executive Office in preparing a contract amendment with Didi Hirsch.

MJS:RK:MM:mm

c: Health Deputies
Chief Executive Officer
Executive Officer, Board of Supervisors
County Counsel
Robin Kay, Ph.D.
Mary Marx, L.C.S.W.
Contracts Development and Administration



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
550 S. VERMONT AVE., LOS ANGELES, CA 90020 HTTP://DMH.LACOUNTY.GOV



MARVIN J. SOUTHARD, D.S.W.
Director

ROBIN KAY, Ph.D.
Chief Deputy Director

RDDERICK SHANER, M.D.
Medical Director

August 12, 2013

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director

SUBJECT: **ADVANCE NOTIFICATION OF INTENT TO ENTER INTO SOLE
SOURCE CONTRACT NEGOTIATIONS WITH SPECIAL SERVICE FOR
GROUPS**

This memo is to comply with the Board of Supervisors Policy Manual, Section 5.100, Sole Source contract. It is the Los Angeles County Department of Mental Health's (DMH's) intent to amend its current agreement with Special Service for Groups (SSG) to implement the SSG Alliance Integrated Care Mobile Team (ICMT) to provide outreach, integrated services and supportive housing for forty (40) homeless adults and Transition Age Youth (TAY) living in the San Fernando Valley.

In recent years, Los Angeles County has collaborated with governmental and non-governmental agencies to implement creative and innovative programs that address homelessness such as Project 50 in the Skid Row area of downtown Los Angeles. However, chronically homeless individuals with serious mental illness and co-occurring substance abuse disorders and/or complex medical conditions continue to live on the streets, under freeway bridges, and in encampments, parks, or temporary shelters in areas throughout the County.

DMH plans to expand services at SSG to implement the ICMT program in the San Fernando Valley. ICMT will provide outreach and mental health services including treatment for co-occurring substance abuse disorders, medication management, crisis intervention, case management, and benefits establishment for forty (40) homeless individuals in supportive housing for over a two-year period.

The cost for the SSG Mobile Health Team for both Fiscal Years is \$813,500, funded with \$716,000 of Third Supervisorial District Homeless Services funding and \$97,500 of Federal Financial Participation Medi-Cal.

SSG, a contracted DMH and Department of Public Health provider, is uniquely qualified to provide integrated health, mental health, and substance abuse treatment services for these homeless individuals from its existing site in the San Fernando Valley. SSG has a long history of providing a full range of recovery-based mental health and substance

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abuse treatment services for the mentally ill homeless population in Service Areas 2, 4, and 6. Agency services include assertive outreach and engagement, individual and group treatment, medication support, crisis intervention, case management, benefits establishment, and employment services. In addition, SSG has the capacity to provide immediate access to medical care through its Federally Qualified Health Center.

Unless otherwise instructed by a Board office within two weeks, DMH will proceed with preparing a sole source contract amendment. DMH will work closely with the Office of the County Counsel and the Chief Executive Office in preparing a contract amendment with SSG.

MJS:RK:MM:mm

c: Health Deputies
Chief Executive Officer
Executive Officer, Board of Supervisors
County Counsel
Robin Kay, Ph.D.
Mary Marx, L.C.S.W.
Contracts Development and Administration

SOLE SOURCE CHECKLIST

Check (✓)	JUSTIFICATION FOR SOLE SOURCE CONTRACTS <i>Identify applicable justification and provide documentation for each checked item.</i>
✓	➤ Only one bona fide source for the service exists; performance and price competition are not available. Please explanation below.
	➤ Quick action is required (emergency situation).
	➤ Proposals have been solicited but no satisfactory proposals were received.
	➤ Additional services are needed to complete an ongoing task and it would be prohibitively costly in time and money to seek a new service provider.
	➤ Maintenance service agreements exist on equipment which must be serviced by the authorized manufacturer's service representatives.
	➤ It is more cost-effective to obtain services by exercising an option under an existing contract.
	➤ It is in the best interest of the County, e.g., administrative cost savings, excessive learning curve for a new service provider, etc.
✓	<p>➤ Other reason. Please explain:</p> <p>The Third District awarded Didi Hirsch money to implement this pilot project because it is the only agency in the area with all of the following qualifications: (1) has a long history as a provider with DMH, the Department of Public Health's (DPH) Substance Abuse Prevention and Control, and the Department of Children and Family Services; (2) has partnered with DMH in Project 50 and is uniquely familiar with the challenges of homeless individuals who struggle with mental illness and substance abuse; (3) is a leader in treatment of abused/traumatized children and understands the challenges of children in kin/foster care; and (4) has an existing women's residential treatment program in Pacoima that can quickly be adapted to accommodate this pilot program.</p> <p>The Third District also awarded funding to Special Service for Groups (SSG) to implement its pilot project because it is the only agency in the area that has all of the following qualifications: (1) has a long history with DMH and DPH providing a full range of integrated health, recovery-based mental health, and substance abuse treatment services for the mentally ill homeless population; (2) has experience providing Institutions for Mental Diseases Step-down services; (3) provides services in more than 20 languages in addition to offering medical interpretation, navigation, and promotes services to its diverse clientele; and (4) has immediate access to physical healthcare through its own Federally Qualified Health Center.</p>
 Senior Assistant Chief Executive Officer	 Date